

AMENDED IN ASSEMBLY AUGUST 20, 2008

AMENDED IN ASSEMBLY AUGUST 11, 2008

AMENDED IN ASSEMBLY JULY 1, 2008

AMENDED IN ASSEMBLY JUNE 19, 2008

AMENDED IN SENATE MAY 27, 2008

AMENDED IN SENATE MAY 23, 2008

AMENDED IN SENATE APRIL 22, 2008

SENATE BILL

No. 1406

Introduced by Senators Correa and Aanestad

February 21, 2008

An act to amend Sections 3041 and 3152 of, and to add and repeal Section 3041.10 of, the Business and Professions Code, relating to optometry.

LEGISLATIVE COUNSEL'S DIGEST

SB 1406, as amended, Correa. Optometry.

Existing law, the Optometry Practice Act, creates the State Board of Optometry, which licenses optometrists and regulates their practice. The act defines the practice of optometry as including the prevention and diagnosis of disorders and dysfunctions of the visual system, and the treatment and management of certain disorders and dysfunctions of the visual system. The act also prescribes certain eye or eye appendage conditions which an optometrist who is certified to use therapeutic pharmaceutical agents may diagnose and treat, as specified and subject to certain limitations, and requires additional certification for the

performance of primary open-angle glaucoma and lacrimal irrigation and dilation procedures, respectively.

This bill would revise and recast those provisions to further allow an optometrist who is certified to use therapeutic pharmaceutical agents to, among others, treat glaucoma, as defined, under specified certification standards, ~~order any test or procedure~~ X-rays necessary for the diagnosis of conditions or diseases of the eye or adnexa, ~~to perform punctal occlusion by cautery~~ venipuncture for testing patients suspected of having diabetes, administer oral fluorescein to patients suspected of having diabetic retinopathy, ~~to~~ prescribe lenses or devices that incorporate a medication or therapy the optometrist is certified to prescribe or provide, ~~to and use sharp specified~~ instruments within the central 3 millimeters of the cornea, ~~and to perform nonintraorbital injections~~. The bill would further allow an optometrist who graduated from an accredited school of optometry on or after May 1, 2000, to perform lacrimal irrigation and dilation procedures without additional certification. The bill would also make other changes with regard to the circumstances under which an ophthalmologist or an appropriate physician and surgeon ~~or other health care provider~~ is required to be consulted with, or patients referred to, and to certain age requirements related to treatment or diagnosis, as specified. The bill would further make a conforming change to a related provision, ~~and would make a statement of legislative intent, as specified.~~

Until January 1, 2010, this bill would also provide for a Glaucoma Diagnosis and Treatment Advisory Committee ~~within the State Board of Optometry~~ to consist of 6 members *appointed by the State Board of Optometry* for purposes of ~~assisting the board in~~ establishing certain requirements for glaucoma certification. The bill would require the committee to submit its final recommendations to the Office of Examination Resources of the Department of Consumer Affairs by April 1, 2009, would require the office to present ~~those recommendations~~ *its findings* and any modifications thereof to the board by July 1, 2009, and require the board to adopt the office's findings by January 1, 2010.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 3041 of the Business and Professions
- 2 Code is amended to read:

1 3041. (a) The practice of optometry includes the prevention
2 and diagnosis of disorders and dysfunctions of the visual system,
3 and the treatment and management of certain disorders and
4 dysfunctions of the visual system, as well as the provision of
5 rehabilitative optometric services, and is the doing of any or all of
6 the following:

7 (1) The examination of the human eye or eyes, or its or their
8 appendages, and the analysis of the human vision system, either
9 subjectively or objectively.

10 (2) The determination of the powers or range of human vision
11 and the accommodative and refractive states of the human eye or
12 eyes, including the scope of its or their functions and general
13 condition.

14 (3) The prescribing or directing the use of, or using, any optical
15 device in connection with ocular exercises, visual training, vision
16 training, or orthoptics.

17 (4) The prescribing of contact and spectacle lenses for, or the
18 fitting or adaptation of contact and spectacle lenses to, the human
19 eye, including lenses that may be classified as drugs or devices by
20 any law of the United States or of this state.

21 (5) The use of topical pharmaceutical agents for the purpose of
22 the examination of the human eye or eyes for any disease or
23 pathological condition.

24 (b) (1) An optometrist who is certified to use therapeutic
25 pharmaceutical agents, pursuant to Section 3041.3, may also
26 diagnose and treat the human eye or eyes, or any of its appendages,
27 for all of the following conditions:

28 (A) Through medical treatment, infections of the anterior
29 segment and adnexa, excluding the lacrimal gland, the lacrimal
30 drainage system, and the sclera in patients under 12 years of age.

31 (B) Ocular allergies of the anterior segment and adnexa.

32 (C) Ocular inflammation, *nonsurgical in cause except when*
33 *comanaged with the treating physician and surgeon*, limited to
34 inflammation resulting from traumatic iritis, peripheral corneal
35 inflammatory keratitis, episcleritis, and unilateral nonrecurrent
36 nongranulomatous idiopathic iritis in patients over ~~12~~ 18 years of
37 age. Unilateral nongranulomatous idiopathic iritis recurring within
38 one year of the initial occurrence shall be referred to an
39 ophthalmologist. An optometrist shall consult with an
40 ophthalmologist or appropriate physician and surgeon if a patient

1 has a recurrent case of episcleritis within one year of the initial
2 occurrence. An optometrist shall consult with an ophthalmologist
3 or appropriate physician and surgeon if a patient has a recurrent
4 case of peripheral corneal inflammatory keratitis within one year
5 of the initial occurrence.

6 (D) Traumatic or recurrent conjunctival or corneal abrasions
7 and erosions.

8 (E) Corneal surface disease and dry eyes.

9 (F) Ocular pain, *nonsurgical in cause except when comanaged*
10 *with the treating physician and surgeon*, associated with conditions
11 optometrists are authorized to treat.

12 (G) Pursuant to subdivision (f), glaucoma in patients over 18
13 years of age, as described in subdivision (j).

14 (2) For purposes of this section, “treat” means the use of
15 therapeutic pharmaceutical agents, as described in subdivision (c),
16 and the procedures described in subdivision (e).

17 (c) In diagnosing and treating the conditions listed in subdivision
18 (b), an optometrist certified to use therapeutic pharmaceutical
19 agents pursuant to Section 3041.3 may use all of the following
20 therapeutic pharmaceutical agents:

21 (1) Pharmaceutical agents as described in paragraph (5) of
22 subdivision (a), as well as topical miotics.

23 (2) Topical lubricants.

24 (3) Antiallergy agents. *In using topical steroid medication for*
25 *the treatment of ocular allergies, an optometrist shall consult with*
26 *an ophthalmologist if the patient’s condition worsens 21 days after*
27 *diagnosis.*

28 (4) Topical and oral antiinflammatories. In using steroid
29 medication for:

30 (A) Unilateral nonrecurrent nongranulomatous idiopathic iritis
31 or episcleritis, an optometrist shall consult with an ophthalmologist
32 ~~or other appropriate health care provider~~ *appropriate physician*
33 *and surgeon* if the patient’s condition worsens 72 hours after the
34 diagnosis, or if the patient’s condition has not resolved three weeks
35 after diagnosis. If the patient is still receiving medication for these
36 conditions six weeks after diagnosis, the optometrist shall refer
37 the patient to an ophthalmologist or ~~other appropriate health care~~
38 ~~provider.~~ *appropriate physician and surgeon.*

39 (B) Peripheral corneal inflammatory keratitis, excluding
40 Moorens and Terriens diseases, an optometrist shall consult with

1 an ophthalmologist or ~~other appropriate health care provider~~
2 *appropriate physician and surgeon* if the patient's condition
3 worsens 72 hours after diagnosis.

4 (C) Traumatic iritis, an optometrist shall consult with an
5 ophthalmologist or appropriate physician and surgeon if the
6 patient's condition worsens 72 hours after diagnosis and shall refer
7 the patient to an ophthalmologist or appropriate physician and
8 surgeon if the patient's condition has not resolved one week after
9 diagnosis.

10 (5) Topical antibiotic agents.

11 (6) Topical hyperosmotics.

12 (7) Topical and oral antiglaucoma agents pursuant to the
13 certification process defined in subdivision (f).

14 (A) The optometrist shall refer the patient to an ophthalmologist
15 if requested by the patient or if angle closure glaucoma develops.

16 (B) If the glaucoma patient also has diabetes, the optometrist
17 shall consult with the physician treating the patient's diabetes in
18 developing the glaucoma treatment plan and shall inform the
19 physician in writing of any changes in the patient's glaucoma
20 medication.

21 (8) Nonprescription medications used for the rational treatment
22 of an ocular disorder.

23 (9) Oral antihistamines.

24 (10) Prescription oral nonsteroidal antiinflammatory agents.

25 (11) Oral antibiotics for medical treatment of ocular disease.

26 (A) If the patient has been diagnosed with a central corneal ulcer
27 and the central corneal ulcer has not improved ~~72~~ 48 hours after
28 diagnosis, the optometrist shall refer the patient to an
29 ophthalmologist.

30 (B) If the patient has been diagnosed with preseptal cellulitis
31 or dacryocystitis and the condition has not improved ~~72~~ 48 hours
32 after diagnosis, the optometrist shall refer the patient to an
33 ophthalmologist.

34 (12) Topical and oral antiviral medication for the medical
35 treatment of the following: herpes simplex viral keratitis, herpes
36 simplex viral conjunctivitis, and periocular herpes simplex viral
37 dermatitis; and varicella zoster viral keratitis, varicella zoster viral
38 conjunctivitis, and periocular varicella zoster viral dermatitis.

39 (A) If the patient has been diagnosed with herpes simplex
40 keratitis or varicella zoster viral keratitis and the patient's condition

1 has not improved seven days after diagnosis, the optometrist shall
2 refer the patient to an ophthalmologist. If a patient's condition has
3 not resolved three weeks after diagnosis, the optometrist shall refer
4 the patient to an ophthalmologist.

5 (B) If the patient has been diagnosed with herpes simplex viral
6 conjunctivitis, herpes simplex viral dermatitis, varicella zoster
7 viral conjunctivitis, or varicella zoster viral dermatitis, and if the
8 patient's condition worsens seven days after diagnosis, the
9 optometrist shall consult with an ophthalmologist. If the patient's
10 condition has not resolved three weeks after diagnosis, the
11 optometrist shall refer the patient to an ophthalmologist.

12 (13) Oral analgesics that are not controlled substances.

13 (14) Codeine with compounds and hydrocodone with
14 compounds as listed in the California Uniform Controlled
15 Substances Act (Section 11000 of the Health and Safety Code et
16 seq.) and the United States Uniform Controlled Substances Act
17 (21 U.S.C. Sec. 801 et seq.). The use of these agents shall be
18 limited to three days, with a referral to an ophthalmologist if the
19 pain persists.

20 (d) In any case where this chapter requires that an optometrist
21 consult with an ophthalmologist, the optometrist shall maintain a
22 written record in the patient's file of the information provided to
23 the ophthalmologist, the ophthalmologist's response and any other
24 relevant information. Upon the consulting ophthalmologist's
25 request and with the patient's consent, the optometrist shall furnish
26 a copy of the record to the ophthalmologist.

27 (e) An optometrist who is certified to use therapeutic
28 pharmaceutical agents pursuant to Section 3041.3 may also perform
29 all of the following:

30 ~~(1) Procedures necessary for the diagnosis or treatment of a~~
31 ~~condition of the eye or visual system, including:~~

32 ~~(A)~~

33 ~~(1) Corneal scraping with cultures.~~

34 ~~(B) Debridement.~~

35 ~~(C) Epilation, including with cryo or electro-cautery.~~

36 ~~(D) Nonintraorbital injections.~~

37 ~~(E) Removal of skin tags.~~

38 ~~(F) Shaving of epidermal or dermal lesions.~~

39 ~~(G) Stromal micropuncture.~~

40 (2) *Debridement of corneal epithelia.*

1 (3) *Mechanical epilation.*

2 (4) *Venipuncture for testing patients suspected of having*
3 *diabetes.*

4 ~~(H)~~

5 (5) *Suture removal, with prior consultation with the treating*
6 *physician and surgeon.*

7 ~~(I) Treatment or removal of lymphatic or sebaceous cysts.~~

8 (6) *Treatment or removal of sebaceous cysts by expression.*

9 (7) *Administration of oral fluorescein to patients suspected as*
10 *having diabetic retinopathy.*

11 (8) *Use of an auto-injector to counter anaphylaxis.*

12 ~~(2)~~

13 (9) *Ordering of smears, cultures, sensitivities, complete blood*
14 *count, mycobacterial culture, acid fast stain, urinalysis, and other*
15 *tests or procedures X-rays necessary for the diagnosis of conditions*
16 *or diseases of the eye or adnexa. An optometrist may order other*
17 *types of images subject to prior consultation with an*
18 *ophthalmologist or appropriate physician and surgeon.*

19 ~~(3)~~

20 (10) *Punctal occlusion by plugs and cautery, excluding laser,*
21 *diathermy, cryotherapy, or other means constituting surgery as*
22 *defined in this chapter.*

23 ~~(4)~~

24 (11) *The prescription of therapeutic contact lenses, including*
25 *lenses or devices that incorporate a medication or therapy the*
26 *optometrist is certified to prescribe or provide.*

27 ~~(5)~~

28 (12) *Removal of foreign bodies from the cornea, eyelid, and*
29 *conjunctiva with any appropriate instrument other than a scalpel*
30 *or needle. Corneal foreign bodies shall be nonperforating, be no*
31 *deeper than the midstroma, and require no surgical repair upon*
32 *removal.*

33 ~~(6)~~

34 (13) *For patients over 12 years of age, lacrimal irrigation and*
35 *dilation, excluding probing of the nasal lacrimal tract. The board*
36 *shall certify any optometrist who graduated from an accredited*
37 *school of optometry before May 1, 2000, to perform this procedure*
38 *after submitting proof of satisfactory completion of 10 procedures*
39 *under the supervision of an ophthalmologist as confirmed by the*
40 *ophthalmologist. Any optometrist who graduated from an*

1 accredited school of optometry on or after May 1, 2000, shall be
2 exempt from the certification requirement contained in this
3 paragraph.

4 (f) The board shall grant a certificate to an optometrist certified
5 pursuant to Section 3041.3 for the treatment of glaucoma, as
6 described in subdivision (j), in patients over 18 years of age after
7 the optometrist meets the following applicable requirements:

8 (1) For licensees who graduated from an accredited school of
9 optometry on or after May 1, 2008, submission of proof of
10 graduation from that institution.

11 ~~(2) For licensees who were certified to treat glaucoma under~~
12 ~~this chapter prior to January 1, 2009, submission of proof of~~
13 ~~completion of that certification program.~~

14 ~~(3) For licensees who graduated from an accredited school of~~
15 ~~optometry on or after May 1, 2000, submission of proof of~~
16 ~~satisfactory completion of not less than 12 hours in case~~
17 ~~management of patients diagnosed with glaucoma.~~

18 ~~(4) For licensees who have completed a didactic course of not~~
19 ~~less than 24 hours in the diagnosis, pharmacological, and other~~
20 ~~treatment and management of glaucoma developed by an accredited~~
21 ~~school of optometry, submission of proof of satisfactory completion~~
22 ~~of not less than 12 hours in case management of patients diagnosed~~
23 ~~with glaucoma.~~

24 ~~(5) For licensees not described in the preceding paragraphs,~~
25 ~~submission of proof of satisfactory completion of a didactic course~~
26 ~~of not less than 24 hours in the diagnosis, pharmacological, and~~
27 ~~other treatment and management of glaucoma developed by an~~
28 ~~accredited school of optometry, and not less than 12 hours in case~~
29 ~~management of patients diagnosed with glaucoma.~~

30 *(2) For licensees who were certified to treat glaucoma under*
31 *this section prior to January 1, 2009, submission of proof of*
32 *completion of that certification program.*

33 *(3) For licensees who have substantially completed the*
34 *certification requirements pursuant to this section in effect between*
35 *January 1, 2001, and December 31, 2008, submission of proof of*
36 *completion of those requirements on or before December 31, 2009.*
37 *“Substantially completed” means both of the following:*

38 *(A) Satisfactory completion of a didactic course of not less than*
39 *24 hours in the diagnosis, pharmacological, and other treatment*
40 *and management of glaucoma.*

1 (B) Treatment of 50 glaucoma patients with a collaborating
2 ophthalmologist for a period of two years for each patient that
3 will conclude on or before December 31, 2009.

4 (4) For licensees who completed a didactic course of not less
5 than 24 hours in the diagnosis, pharmacological, and other
6 treatment and management of glaucoma, submission of proof of
7 satisfactory completion of the case management requirements for
8 certification established by the board pursuant to Section 3014.10.

9 (5) For licensees who graduated from an accredited school of
10 optometry on or before May 1, 2008, and not described in
11 paragraph (2), (3), or (4), submission of proof of satisfactory
12 completion of the requirements for certification established by the
13 board pursuant to Section 3014.10.

14 (g) Other than for prescription ophthalmic devices described in
15 subdivision (b) of Section 2541, any dispensing of a therapeutic
16 pharmaceutical agent by an optometrist shall be without charge.

17 (h) The practice of optometry does not include performing
18 surgery. "Surgery" means any procedure in which human tissue
19 is cut, altered, or otherwise infiltrated by mechanical or laser means
20 ~~in a manner not specifically authorized by this chapter. Nothing.~~
21 "Surgery" does not include those procedures specified in
22 subdivision (e). Nothing in this section shall limit an optometrist's
23 authority to utilize diagnostic laser and ultrasound technology
24 within his or her scope of practice.

25 (i) An optometrist licensed under this chapter is subject to the
26 provisions of Section 2290.5 for purposes of practicing
27 telemedicine.

28 (j) For purposes of this chapter, "glaucoma" means either of the
29 following:

30 (1) All primary open-angle glaucoma.

31 ~~(2) All secondary open-angle glaucoma, excluding irido-corneal~~
32 ~~endothelial syndrome and neovascular glaucoma.~~

33 ~~(k) For purposes of reversal or stabilization, an optometrist shall~~
34 ~~(2) Exfoliation and pigmentary glaucoma.~~

35 (k) In an emergency, an optometrist shall stabilize, if possible,
36 and immediately refer any patient who has an acute attack of angle
37 closure to an ophthalmologist.

38 SEC. 2. Section 3041.10 is added to the Business and
39 Professions Code, to read:

1 3041.10. (a) The Legislature hereby finds and declares that it
2 is necessary to ensure that the public is adequately protected during
3 the transition to full certification for all licensed optometrists who
4 desire to treat and manage glaucoma patients.

5 (b) The board shall appoint a Glaucoma Diagnosis and
6 Treatment Advisory Committee as soon as practicable after January
7 1, 2009. The committee shall consist of six members currently
8 licensed and in active practice in their professions in California,
9 with the following qualifications:

10 (1) Two members shall be optometrists who were certified by
11 the board to treat glaucoma pursuant to the provisions of
12 subdivision (f) of Section 3041, as that provision read on January
13 1, 2001, and who are actively managing glaucoma patients in
14 full-time practice.

15 (2) One member shall be a glaucoma-certified optometrist
16 currently active in educating optometric students in glaucoma.

17 (3) One member shall be a physician and surgeon board-certified
18 in ophthalmology with a specialty or subspecialty in glaucoma
19 who is currently active in educating optometric students in
20 glaucoma.

21 (4) Two members shall be physicians and surgeons
22 board-certified in ophthalmology who treat glaucoma patients.

23 ~~(e) The board shall solicit from the following organizations their~~
24 ~~advice and recommendations before appointing members of the~~
25 ~~committee:~~

26 ~~(1) For the optometrists' appointments:~~

27 ~~(A) The California Optometric Association.~~

28 ~~(B) The Southern California College of Optometry.~~

29 ~~(C) The University of California at Berkeley School of~~
30 ~~Optometry.~~

31 ~~(2) For the physician and surgeons' appointments:~~

32 ~~(A) The California Medical Association.~~

33 ~~(B) The California Academy of Eye Physicians and Surgeons.~~

34 ~~(C) Ophthalmology residency programs and treatment centers~~
35 ~~located at a California school or schools of medicine.~~

36 *(c) The board shall appoint the members of the committee from*
37 *a list provided by the following organizations:*

38 *(1) For the optometrists' appointments, the California*
39 *Optometric Association.*

1 (2) *For the physician and surgeons' appointments, the*
2 *California Medical Association and the California Academy of*
3 *Eye Physicians and Surgeons.*

4 (d) The committee shall ~~assist the board in establishing~~ *establish*
5 requirements for glaucoma certification, as authorized by Section
6 3041, by recommending *both of* the following:

7 ~~(1) An appropriate 12-hour case management curriculum for~~
8 ~~applicants for certification described in paragraphs (3) and (4) of~~
9 ~~subdivision (f) of Section 3041.~~

10 ~~(2) An appropriate 36-hour didactic and case management~~
11 ~~curriculum for applicants for certification described in paragraph~~
12 ~~(5) of subdivision (f) of Section 3041.~~

13 *(1) An appropriate curriculum for case management of patients*
14 *diagnosed with glaucoma for applicants for certification described*
15 *in paragraph (4) of subdivision (f) of Section 3041.*

16 *(2) An appropriate combined curriculum of didactic instruction*
17 *in the diagnostic, pharmacological, and other treatment and*
18 *management of glaucoma, and case management of patients*
19 *diagnosed with glaucoma, for certification described in paragraph*
20 *(5) of subdivision (f) of Section 3041.*

21 *In developing its findings, the committee shall presume that*
22 *licensees who apply for glaucoma certification and who graduated*
23 *from an accredited school of optometry on or after May 1, 2008,*
24 *possess sufficient didactic and case management training in the*
25 *treatment and management of patients diagnosed with glaucoma*
26 *to be certified. After reviewing training programs for representative*
27 *graduates, the committee in its discretion may recommend*
28 *additional glaucoma training to the Office of Examination*
29 *Resources pursuant to subdivision (f) to be completed before a*
30 *license renewal application from any licensee described in this*
31 *subdivision is approved.*

32 (e) The committee shall meet at such times and places as
33 determined by the board and shall not meet initially until all six
34 members are appointed. Committee meetings shall be public and
35 a quorum shall consist of four members in attendance at any
36 properly noticed meeting.

37 (f) (1) The committee shall submit its final recommendations
38 to the Office of Examination Resources of the department on or
39 before April 1, 2009. The office shall examine the committee's

1 recommended curriculum requirements to determine whether they
2 will do the following:

3 (A) Adequately protect glaucoma patients.

4 (B) Ensure that defined applicant optometrists will be certified
5 to treat glaucoma on an appropriate and timely basis.

6 (C) Be consistent with the department's and board's examination
7 validation for licensure and occupational analyses policies adopted
8 pursuant to subdivision (b) of Section 139.

9 (2) The office shall present ~~the recommendations~~ *its findings*
10 and any modifications necessary to meet the requirements of
11 paragraph (1) to the board on or before July 1, 2009. The board
12 shall adopt the findings of the office and shall implement
13 certification requirements pursuant to this section on or before
14 January 1, 2010.

15 (g) This section shall remain in effect only until January 1, 2010,
16 and as of that date is repealed, unless a later enacted statute, that
17 is enacted before January 1, 2010, deletes or extends that date.

18 SEC. 3. Section 3152 of the Business and Professions Code is
19 amended to read:

20 3152. The amount of fees and penalties prescribed by this
21 chapter shall be established by the board in amounts not greater
22 than those specified in the following schedule:

23 (a) The fee for applicants applying for a license shall not exceed
24 two hundred seventy-five dollars (\$275).

25 (b) The fee for renewal of an optometric license shall not exceed
26 five hundred dollars (\$500).

27 (c) The annual fee for the renewal of a branch office license
28 shall not exceed seventy-five dollars (\$75).

29 (d) The fee for a branch office license shall not exceed
30 seventy-five dollars (\$75).

31 (e) The penalty for failure to pay the annual fee for renewal of
32 a branch office license shall not exceed twenty-five dollars (\$25).

33 (f) The fee for issuance of a license or upon change of name
34 authorized by law of a person holding a license under this chapter
35 shall not exceed twenty-five dollars (\$25).

36 (g) The delinquency fee for renewal of an optometric license
37 shall not exceed fifty dollars (\$50).

38 (h) The application fee for a certificate to treat lacrimal irrigation
39 and dilation shall not exceed fifty dollars (\$50).

1 (i) The application fee for a certificate to treat glaucoma shall
2 not exceed fifty dollars (\$50).

3 (j) The fee for approval of a continuing education course shall
4 not exceed one hundred dollars (\$100).

5 (k) The fee for issuance of a statement of licensure shall not
6 exceed forty dollars (\$40).

7 (l) The fee for biennial renewal of a statement of licensure shall
8 not exceed forty dollars (\$40).

9 (m) The delinquency fee for renewal of a statement of licensure
10 shall not exceed twenty dollars (\$20).

11 (n) The application fee for a fictitious name permit shall not
12 exceed fifty dollars (\$50).

13 (o) The renewal fee for a fictitious name permit shall not exceed
14 fifty dollars (\$50).

15 (p) The delinquency fee for renewal of a fictitious name permit
16 shall not exceed twenty-five dollars (\$25).

17 ~~SEC. 4. It is the intent of the Legislature that interested parties~~
18 ~~come to resolution on the following questions related to proposed~~
19 ~~amendments to existing law made by this act:~~

20 ~~(a) In paragraph (5) of subdivision (a) of Section 3041 of the~~
21 ~~Business and Professions Code, whether it needs to be made clear~~
22 ~~that optometrists certified to use only diagnostic pharmaceutical~~
23 ~~agents may use only topical pharmaceutical agents for diagnostic~~
24 ~~purposes.~~

25 ~~(b) In subparagraph (C) of paragraph (1) of subdivision (b) of~~
26 ~~Section 3041 of the Business and Professions Code, whether it~~
27 ~~needs to be made clear that treatment of postsurgical ocular~~
28 ~~inflammation in cases comanaged by the operating ophthalmologist~~
29 ~~and optometrist is permitted.~~

30 ~~(c) In paragraph (7) of subdivision (c) of Section 3041 of the~~
31 ~~Business and Professions Code, whether it needs to be made clear~~
32 ~~that glaucoma-certified optometrists may use oral glaucoma~~
33 ~~therapeutic pharmaceutical agents only for the purpose of reversing~~
34 ~~or stabilizing angle closure glaucoma prior to immediate referral,~~
35 ~~as specified in subdivision (k) of Section 3041 of the Business and~~
36 ~~Professions Code.~~

37 ~~(d) In subparagraph (A) of paragraph (1) of subdivision (e) of~~
38 ~~Section 3041 of the Business and Professions Code, whether it~~
39 ~~needs to be made clear that optometrists are authorized to perform~~

1 ~~biopsies not requiring sutures for testing purposes to confirm~~
2 ~~diagnoses.~~
3 ~~(e) As provided in subparagraph (J) of paragraph (1) of~~
4 ~~subdivision (e) of Section 3041 of the Business and Professions~~
5 ~~Code, whether optometrists should be authorized to treat or remove~~
6 ~~lymphatic or sebaceous cysts.~~

O